



Fall 2004

Keeping In Touch

News For Family Caregivers

by Lynn Cibuzar, LSW, DARTS Service Coordinator

Help Is NOT a Four-Letter Word

Why is it so hard to ask for help?

What's a good response to the statement, "Call me if you need me?" How is it that despite the fact we are drowning in responsibility or are really confused about what our next step ought to be, we often respond "no thanks" when help is offered?

Asking for and accepting help is a complex issue. Obviously, we first need to recognize that having some help can make a real difference to our loved one's well being and ours as well. Then we need to figure out: What do I actually need help with? And, what kind of help am I willing to accept? There are of course the practical issues like paid help versus unpaid help.

If all this just sounds like more work, think of it as a way to organize thoughts and information you may already have. Having help can restore your equilibrium because removing some responsibility from your shoulders will lessen your stress. It will also let you be a more peaceful and effective caregiver because you won't feel so alone. You'll be a happier and healthier person.

It's precisely because you do care that getting some help when you need it is important. Here are a few benefits:

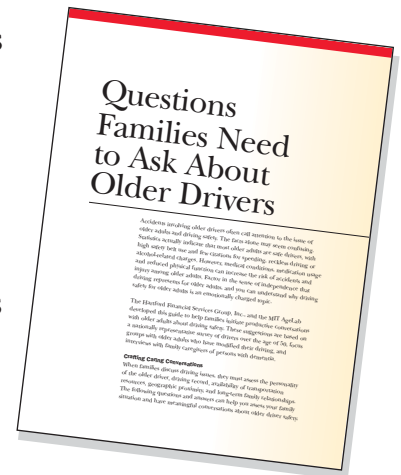
- Help can lessen your sense of isolation.
- Help can move the dial on your "worry meter" down to a safe level.

(continued on back)

May We Help You?

We Need to Talk offers families easy-to-use, practical information on advising loved ones about whether it's time to limit, or perhaps give up, driving. This guidebook is a multi-step approach to crafting candid, effective discussions about older driver safety. The guide includes a warning signs checklist; strategies for alternative transportation; testing opportunities; and recommendations on how to approach a person with dementia or a high-risk driver who refuses to stop driving.

Maureen Mohyde, co-author of the guide, emphasizes that age alone is not an indication that a person needs to give up driving. *"As a group, older drivers are typically safe drivers. Drivers age 65 and older represent 14 percent of the driving population, but just 8 percent of vehicular accidents. When older drivers do have problems behind the wheel, most prefer to hear from family members first. Before broaching the subject or taking drastic action, families need to take the time to observe first-hand their relative's driving behavior to see if skills have deteriorated."*



Mohyde notes that the research found two-thirds of older drivers voluntarily restrict their driving to avoid night driving, slippery road conditions, rush hour traffic, or other difficult conditions.

The 24-page guide is free and available at www.thehartford.com/talkwitholderdrivers or by calling DARTS information at 651-455-1560; we'll mail one to you.

MYTHS & FACTS

ABOUT FINANCING LONG-TERM CARE

Myths about financing long-term care are far too common. Studies suggest that many people think they know enough about long-term care, but in reality, they don't. What about you? The following myths and facts are from a valuable new website from the University of Minnesota, www.financinglongtermcare.umn.edu

Myth: Typically, you need to identify one payment source or financing option to protect your financial security against long-term care costs.

FACT: Planning for financing long-term care is really about fitting pieces of a puzzle together. People will likely piece together many options – there isn't one financial answer or solution. Families combine personal resources, insurance, and government options to create their own solutions.

Myth: Most people have planned ahead for financing long-term care.

FACT: Few people have adequately prepared for long-term care financing. A recent study found that 67% of respondents recognized that long-term care threatens their financial security in retirement, but only 12% felt adequately prepared for the possibility they will need care.

Myth: Financing long-term care is only about money – what's the big deal?

FACT: Planning for long-term care is a family decision that involves a lot more than just finances. It's really about sorting out goals, concerns, expectations, feelings, and values and communicating these to family, friends, and supporters.

Myth: Family members will think alike about who should pay for long-term care.

FACT: It's very common for spouses, partners, parents, and adult children to think quite differently about who should pay for long-term care. Is it a family responsibility, a role of government, or private insurance? Does family responsibility include unpaid caregiving? Taking time to talk about different expectations and beliefs can prevent misunderstandings, wrong assumptions, and conflicts.

Myth: Most families talk openly and easily about financing long-term care.

FACT: According to a national survey, 50% of adult children have discussed long-term care with their parents, and 28% of parents have discussed long-term care with their adult children. The lack of family discussion is a significant challenge to long-term care planning. Talking about long-term care involves facing issues of death, dying, decreasing independence, and money – all of which can be taboo topics in families.

Myth: Leaving an inheritance is important to everyone.

FACT: A study examining later-life financial security goals found that while leaving an inheritance to family members was a desire and goal for some elders, it was a goal few appeared to be willing to meet at the expense of other goals such as providing quality care, losing control, privacy, or not being self-sufficient.

Myth: Families end up paying very little for long-term care.

FACT: Most long-term care costs are paid for out-of-pocket from the private income and life savings of individuals. In addition, unpaid family caregivers provide approximately 75% of long-term care needed. Working caregivers spend an average of 22 hours a week providing elder care, caregiving responsibilities can last 8-10 years, and working caregivers lose an average of \$650,000 in lost wages, lost benefits, and lost retirement contributions.

(continued from front)

- **Help** can encourage your loved one to be more independent.
- **Help** can give you more confidence in managing caregiving responsibilities.
- **Help** can increase your ability to think creatively and expand your options.

If you can find even one person or one service that can reduce your regular workload or help with your caregiving needs, you'll have more time for caregiving and less stress bearing down on you. And, you'll be in a better position to meet your non-caregiving responsibilities. Finding help is often difficult due to emotional, financial, and geographic reasons, but it can make a big difference in your loved one's well being as well as your own. It's worth the effort.

This article is excerpted and adapted from Suzanne Mintz's book, *Love Honor and Value: A Family Caregiver Writes about the Choices and Challenges of Caregiving.*

www.nfcares.org



**National Family Caregivers Month
November 2004**

If you do not want to receive this newsletter, call DARTS at 651-455-1560 and ask to have your name removed from the Keeping In Touch mailing list.